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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 04 1997 8:00am

Secretary of State

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Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

716009

(6)

LONGBOAT KEY TOWERS ASSOCIATION, INC.

Principal Place				- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	SOM DINES DA	FOR BURDE BURDE O	JANA DIDILI FADA		
601-603 LONGE LONGBOAT KE	IOAT CLUB ROAD Y FL 34228		01-603 LONGBOAT CLUB ROAD ONGBOAT KEY FL 34228-3810						
						3. Date incorporated or Qualified 02/07/1969	3a. Da	te of Last R 07/17/19	eport 1 96
2. Principat Pl 21	ace of Business	2a. Malling Address 26				4. FEI Number 59-1311340			oplied For ot Applicable
Suite, Apt.		Suite, Apt. #, etc.	 	***		5. Certificate of Status Desired		\$8.75 / Fee Re	oquired
City & State		City & State	,			Election Campaign Financing Trust Fund Contribution		Added	May Be lo Fees
Zip 24	Country 25	Zip 29	Cour 30	ntry		This corporation has liability for it Florida Statutes	intangible Yes [. 199.032,
	9. Name and Address of Current	Registered Agent	1			10. Name and Address of New Re-	gistered /	Agent	
***************************************				B1 Nam	iÐ		······································		
SEIGLE, SAUL 803 LONGBOAT CLUB ROAD				82 Stree	et Addres	Idress (P.O. Box Number is Not Acceptable)			
APT. #5			ŀ	B3					
LONGBO	DAT KEY FL 34228			B4 City			FL	85 Zip	Code
SIGNATURE _	to the provisions of Sections 617,0502 egistered agent, or both, in the State of mailtiar with, and accept the obligations of the state of sections of the section of the s					ration submits this statement for the p n's board of directors. I hereby accep when reinstating)	ot the app	changing li olntment as	ts registered registered
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICE	ERS AND	DIRECTOR	S IN 12
TITLE	P	☐ DELETE	1.1 10	E	<u> </u>			☐ Change	☐ Addition
NAME	SEIGLE, SAUL		1,2 NA	ME	-				
STREET ADDRESS	603 LONGBOAT CLUB ROAD			EET ADDRES	s				
CITY - ST - ZIP	LONGBOAT KEY FL	T Delete		Y-ST-ZIP			 	T Observed	Adamsia
TITLE	I	☐ DELETE	2.1 TIT		- }			L Change	Addition
NAME	ROSE, EDWIN D		2.2 NA			· · · · · · · · · · · · · · · · · · ·			
STREET ADDRESS	601 LONGBOAT CLUB RD		2.3 ST	EET ADDRES	S				
CITY-ST-ZIP	LONGBOAT KEY FL			2.4 CITY-ST-ZIP					l de coni
TITLE	D	☐ DELETE	3.1 TiT		l			Change	☐ Addition
NAME	MAY, HAROLD		32 NA	ME					
STREET ADDRESS	601 LONGBOAT CLUB ROAD		3.3 \$TI	LEET ADDRES	s		*		
CITY-ST-ZIP	LONGBOAT KEY FL		3.4. CF	Y-ST-ZIP					
TITLE	V	☐ DELETE	4.1 TIT	LE.				L. Change	Addition
NAME	Joutras, Richard		4. 2 NA	ME					
STREET ADDRESS	603 LONGBOAT CLUB ROAD		4.3 STI	REET ADDRES	s				
CITY-ST-ZIP	LONGBOAT KEY, FL 00000		4.4 CIT	Y+ST-ZIP		·			
TITLE	AT	☐ DELETE	5.1 T(T	E	1			Change	Addition
NAME	Kent, ralph e		52 NA	ME					
STREET ADORESS	603 LONGBOAT CLUB RD		5.3 ST	EET ADDRES	s				
CITY-ST-ZIP	LONGBOAT KEY FL		5.4 CIT	Y-ST-ZIP	j				
TITLE	S	☐ DELETE	6.1 TIT		1			Change	Addition
NAME	LEVITES, DOROTHY		6.2 NA	ME					
STREET ADDRESS	601 LONGBOAT CLUB RD		6.3 ST	EET ADDRES	.s				
CITY-SF-ZIP	LONGBOAT KEY, FL 00000			Y-ST-ZIP		<u>.</u>			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the conformation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name